

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-876)

SERIAL NO.

9/781679

FILING DATE

APPLICANT(S)

CLAIMS

4/6/05

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
4						
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47						
48						
49						
50						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

4/6/05

	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
55						
56						
57						
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59						
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96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

Pg. 1

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FEE CALCULATION SHEET
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SERIAL NO.

9/781679

FILING DATE

APPLICANT(S)

Pg. 2

4/6/05 CLAIMS						
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
IND.	DEP.	IND.	DEP.	IND.	DEP.	
101						51
102						52
103						53
104						54
105						55
106						56
107						57
108						58
109						59
110						60
111						61
112						62
113						63
114						64
115						65
116						66
117						67
118						68
119						69
120						70
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136						86
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138						88
139						89
140						90
141						91
142						92
143						93
144						94
145						95
146						96
147						97
148						98
149						99
150						100
TOTAL IND.	6					TOTAL IND.
TOTAL DEP.	65					TOTAL DEP.
TOTAL CLAIMS	71					TOTAL CLAIMS